

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

500 5/12/05

REQUEST FOR PATENT FEE REFUND					
1 Date of Request:	3/9/05	2 Serial/Patent #	10523394		
3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT		
<input checked="" type="checkbox"/> Filing Fee Change			\$ 100.00		
<input type="checkbox"/> Amendment			\$		
<input type="checkbox"/> Extension of Time			\$		
<input type="checkbox"/> Notice of Appeal/Appeal			\$		
<input type="checkbox"/> Petition			\$		
<input type="checkbox"/> Issue			\$		
<input type="checkbox"/> Cert of Correction/Terminal Disc.			\$		
<input type="checkbox"/> Maintenance			\$		
<input type="checkbox"/> Assignment			\$		
<input type="checkbox"/> Other			\$		
			7 TOTAL AMOUNT OF REFUND	\$ 100.00	
			8 TO BE REFUNDED BY:	(C)	
			Treasury Check		
			Credit Deposit A/C #:		
			,	--	
10 REASON:					
<input checked="" type="checkbox"/> Overpayment					
<input type="checkbox"/> Duplicate Payment					
<input type="checkbox"/> No Fee Due (Explanation):					
11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME: Rita White					
SIGNATURE: Rita White					
OFFICE: DO/EO					
***** THIS SPACE RESERVED FOR FINANCE USE ONLY *****					
APPROVED: _____ DATE: _____					
TITLE: Legal Assistant Examiner					
PHONE: 7308-9140 ext. 231					

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B